

## **Application Data Sheet**

### **Application Information**

Application number:: TBA  
Filing Date:: 02/02/04  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD disks::  
Number of copies of CDs::  
Sequence submission?:: Paper  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title:: Method of Treating HIV Infection and Related Secondary Infections Thereof  
Attorney Docket Number:: 002939.00003  
Request for Early Publication?:: NO  
Request for Non-Publication?:: NO  
Suggested Drawing Figure::  
Total Drawing Sheets:: 6  
Small Entity?:: NO  
Latin name::  
Variety denomination name::  
Petition included?:: NO  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: NO

## **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Arsinur  
Middle Name::  
Family Name:: Burcoglu  
Name Suffix::  
City of Residence:: Sayre  
State or Province of Residence:: Pennsylvania  
Country of Residence:: US  
Street of mailing address:: 703 N Elmer Avenue, Apt. #1  
  
City of mailing address:: Sayre  
State or Province of mailing address:: Pennsylvania  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 18840

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Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Full Capacity

Given Name::

Middle Name::

Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

## **Correspondence Information**

Correspondence Customer Number:: 22907

## **Representative Information**

Representative Customer Number:: 22907

## **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Division of	09/754,066	01/05/01

09/754,066	Continuation of	08/848,013	04/28/97
08/848,013	Continuation-in-Part of	08/185,416	01/24/94
08/185,416	Continuation-in-Part of	08/002,395	01/13/93
08/002,395	Continuation-in-Part of	07/748,277	08/21/91
08/002,295	Continuation-in-Part of	07/830,886	02/04/92
07/830,886	Continuation-in-Part of	07/815,130	12/27/91

## Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

## Assignee Information

Assignee name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::